

**AmeriCorps*VISTA Supervisor
Assessment Form: Quarter 1**

Name:

E-Mail:

Work Number:

Work Address:

Please answer all questions in Sections I and II, and Section III if necessary. Once complete, please mail to the VISTA Leader at:

Dustin González
1202 Washington Street
Laredo, TX 78040

Section I: Problems

- 1) In your first month of service as an AmeriCorps*VISTA Supervisor, describe specific problems and obstacles that you had to overcome in order to get things done.
Whether successful or not, discuss your efforts. (include as many problems as you wish)

- 2) Describe your working relationship with the VISTA volunteer that you are supervising. How often do you have contact with them and through what means (phone, e-mail, in person)? In your opinion, is the current level of interaction sufficient, too little, or too much?
- 3) Describe your position at your organization. Do you feel that your VISTA volunteer has been fully integrated into this VISTA sponsor organization? Discuss some things that you could do as a Supervisor in order to make them feel more like a member of your team.

- 4) Do you feel that your AmeriCorps*VISTA Supervisor training by the Corporation for National Service was adequate? Do you know who should be contacted if you have questions? Please list here any questions you might still have about the VISTA Program.

Section II: Suggestions

What would make your remaining time as an AmeriCorps*VISTA Supervisor more productive? Talk about some things that the Project Coordinator or Team Leader could do to hasten the progress of your VISTA's projects.

Section III: Comments

If needed, please place any additional comments below.